

03129.000100 (016026-9263-01)

PATENT APPLICATION



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

WILLIAM A. LINTON, ET AL.

Appln. No.: 09/981,219

Filed: November 16, 2001

For: RADIO FREQUENCY
IDENTIFICATION METHOD AND
SYSTEM OF DISTRIBUTING
PRODUCTS

)
:
Examiner: Kimberly D. Nguyen

)
:
Group Art Unit: 2876

)
:
December 18, 2003

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

SECOND SUPPLEMENTAL AMENDMENT

Sir:

Introductory Comments

Further to the Amendment filed October 9, 2003, and the Supplemental
Amendment filed November 5, 2003, the Examiner is respectfully requested to amend the above-
identified application as follows:

12/19/2003 AADDF01 00000041 09981219

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258.00 0P

Image

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In re Application of:)
WILLIAM A. LINTON, ET AL.)
Appln. No.: 09/981,219)
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For: RADIO FREQUENCY IDENTIFICATION METHOD)
AND SYSTEM OF VENDING PRODUCTS)
Examiner: Kimberly D. Nguyen
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Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is a Second Supplemental Amendment in the above-identified application.

☐ No additional fee is required.

The fee has been calculated as shown below:

CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	47	MINUS	52	= 0	x \$ 9 \$18	\$ 0.00
INDEP. CLAIMS	13	MINUS	10	= 3	x \$42 \$86	\$ 258.00
Fee for Multiple Dependent claims \$145/\$290						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						\$ 258.00

☐ °Verified Statement claiming small entity status is enclosed, if not filed previously.

☒ A check in the amount of \$ 258.00 is enclosed.

☐ Charge \$____ to Deposit Account No. 06-1205. A duplicate of this sheet is enclosed.

☒ Any prior general authorization to charge an issue fee under 37 C.F.R. § 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. §§ 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate of this paper is enclosed.

☐ A check in the amount of \$____ to cover the Extension fee for response within____ months is enclosed.

☐ A check in the amount of \$____ to cover the Information Disclosure Statement fee is enclosed.

☒ Applicants' undersigned attorney may be reached in our Washington, D.C. office by telephone at (202) 530-1010. All correspondence should continue to be directed to our address given below.

Respectfully submitted,



Attorney for Applicants
Daniel S. Glueck
Registration No. 37,838

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